



Atty. Dkt. No. 072827-1801

TECH CENTER 10/03/2000

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Thomas Stormann et al.

Title: G-PROTEIN FUSION RECEPTORS  
AND CHIMERIC GABA<sub>B</sub>  
RECEPTORS

Appl. No.: 09/679,664

Filing Date: 10/03/2000

Examiner: Robert Landsman

Art Unit: 1647

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450, on the date below.

Deborah Wykes

(Printed Name)

*Deborah Wykes*  
(Signature)

August 26, 2003

(Date of Deposit)

**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD  
OF PATENT APPEALS AND INTERFERENCES**

Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals from the decision of the Examiner finally rejecting Claims 1-11 and 42-46, as indicated in the Final Office Action mailed 2/26/03.

☐ Applicant claims small entity status.

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

☒ Notice of Appeal Fee

☒ To be paid as detailed below

☐ Not required (Fee paid in prior appeal)

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The required fees are calculated below:

<input checked="" type="checkbox"/>	Notice of Appeal Fee	\$320.00
<input checked="" type="checkbox"/>	Extension for response filed within the third month:	\$930.00
<input type="checkbox"/>	Extension:	\$0.00
	FEE TOTAL:	\$1250.00
<input checked="" type="checkbox"/>	Extension Fees Previously paid:	\$930.00
	TOTAL FEE:	\$320.00

☒ Extension of Time Fee

☒ Extension fee paid in prior response.

☐ Please charge Deposit Account No. 50-0872 in the amount of \$320.00 . A duplicate copy of this transmittal is enclosed.

☒ A check in the amount of \$320.00 is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 26 August 2003

By Wesley B. Ames

FOLEY & LARDNER  
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